

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

ABEL MALDONADO FOR CONGRESS

ADDRESS (number and street)

P.O. BOX 5325

Check if different  
than previously  
reported. (ACC)

SANTA MARIA

CA

93456

2. FEC IDENTIFICATION NUMBER ▼

C

C00493379

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

CA

23

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y  
06 / 05 / 2012in the  
State of

CA

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y  
06 / 05 / 2012in the  
State of

CA

5. Covering Period

M M / D D / Y Y Y Y  
07 / 01 / 2011

through

M M / D D / Y Y Y Y  
09 / 30 / 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer BRANDON GESICKI

Signature of Treasurer

BRANDON GESICKI

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
10 / 14 / 2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

**ABEL MALDONADO FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	1

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	1

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	115435.00	412724.00
(b) Total Contribution Refunds (from Line 20(d)) .....	20.00	8520.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	115415.00	404204.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	43047.46	50435.37
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	43047.46	50435.37
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	603768.63	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	262787.51	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

**ABEL MALDONADO FOR CONGRESS**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
07 / 01 / 2011

To:

M M / D D / Y Y Y Y  
09 / 30 / 2011

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

108900.00

404589.00

**(ii) Unitemized.....**

5035.00

5035.00

**(iii) TOTAL of contributions from individuals ▶**

113935.00

409624.00

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

1500.00

3000.00

**(d) The Candidate.....**

0.00

100.00

**(e) TOTAL CONTRIBUTIONS**

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

115435.00

412724.00

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

250000.00

500000.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS**

(add Lines 13(a) and (b)).....

250000.00

500000.00

**14. OFFSETS TO OPERATING EXPENDITURES**

(Refunds, Rebates, etc.) .....

0.00

0.00

**15. OTHER RECEIPTS**

(Dividends, Interest, etc.) .....

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

365435.00

912724.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	43047.46	50435.37
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	250000.00	250000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	250000.00	250000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	20.00	8520.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	20.00	8520.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	293067.46	308955.37

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	531401.09
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	365435.00
25. SUBTOTAL (add Line 23 and Line 24).....	896836.09
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	293067.46
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	603768.63

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**HAWKINS ENGINEERING**

Mailing Address 1813 SPRINGFIELD ROAD

City

MOSS LANDING

State

CA

Zip Code

95039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2011

Transaction ID : INCA339

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**JERRY SCOLARI**

Mailing Address 5410 LONGLEY LANE

City

RENO

State

NV

Zip Code

89511

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SCOLARI'S FOOD &amp; DRUG CO.

Occupation

OWNER

Receipt For: 2012

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2011

Transaction ID : INCA341

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**HARVEY L. HALL**

Mailing Address 1001 21ST STREET

City

BAKERSFIELD

State

CA

Zip Code

93301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HALL AMBULANCE

Occupation

PRESIDENT

Receipt For: 2012

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2011

Transaction ID : INCA343

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 6 OF 79  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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 NAME OF COMMITTEE (In Full)  
**ABEL MALDONADO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>CHARLES KOSMONT</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 11 / 2011
Mailing Address 220 MADERA COURT		<b>Transaction ID : INCA516</b>  Amount of Each Receipt this Period -2500.00
City MONTEREY	State CA	
Zip Code 93940		
FEC ID number of contributing federal political committee. C		
Name of Employer ROCKET FARMS	Occupation CHAIRMAN/CHIEF EXECUTIVE OFFICER	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 0.00	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>GARY POLSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 11 / 2011
Mailing Address 254 NORTH TIGERTAIL ROAD		<b>Transaction ID : INCA433</b>  Amount of Each Receipt this Period 250.00
City LOS ANGELES	State CA	
Zip Code 90049		
FEC ID number of contributing federal political committee. C		
Name of Employer CYDCOR	Occupation CHIEF EXECUTIVE OFFICER	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>PROMOTION PLUS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 11 / 2011
Mailing Address 4104 VACHELL LANE		<b>Transaction ID : INCA515</b>  Amount of Each Receipt this Period -300.00
City SAN LUIS OBISPO	State CA	
Zip Code 93401		
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 0.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	-2550.00
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : INCA516

REFUND OF CREDIT CARD CONTRIBUTION.

Form/Schedule: SA11AI

Transaction ID: INCA515

REFUND OF CREDIT CARD CONTRIBUTION.

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JIM ABBATE****A.**

Mailing Address 140 HERON WAY

City

MERCED

State

CA

Zip Code

95340

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALIA CORPORATION

Occupation

OWNER AND OPERATOR

Receipt For: 2012

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2011

Transaction ID : INCA301

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**RYAN M. ARENSDORF****B.**

Mailing Address 601 E. BALL STREET

City

ANAHEIM

State

CA

Zip Code

92805

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2011

Transaction ID : INCA310

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JON CRAMER****C.**

Mailing Address 1344 WHITE COURT

City

SANTA MARIA

State

CA

Zip Code

93456

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CERTIFIED FREIGHT LINES

Occupation

PRESIDENT

Receipt For: 2012

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2011

Transaction ID : INCA308

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....

3500.00

**TOTAL** This Period (last page this line number only).....



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAVE CROWTHER

A.

Mailing Address P.O. BOX 698

City

CAMBRIA

State

CA

Zip Code

93428

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CROWTHER RANCHOccupation  
RANCHER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2011

Transaction ID : INCA307

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

DONALD GROPPETTI

B.

Mailing Address 3537 E. VASSAR COURT

City

VISALIA

State

CA

Zip Code

93292

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SHEL-DON, INC.Occupation  
AUTO DEALER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2011

Transaction ID : INCA303

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

RAY FRANSCIONI

C.

Mailing Address P.O. BOX 7577

City

SPRECKELS

State

CA

Zip Code

93962

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2011

Transaction ID : INCA334

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

JAMES P. SCURICH

A.

Mailing Address P.O. BOX 936

City

WATSONVILLE

State

CA

Zip Code

95077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2011

Transaction ID : INCA333

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

PETER FRYN

B.

Mailing Address P.O. BOX 777

City

WATSONVILLE

State

CA

Zip Code

95076

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SYSTEM USA INC.

Occupation

MANAGER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2011

Transaction ID : INCA314

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

JILL E. GERMAN

C.

Mailing Address 155 RAINBOW LANE

City

WATSONVILLE

State

CA

Zip Code

95076

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2011

Transaction ID : INCA320

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**KAREN MILLER****A.**

Mailing Address P.O. BOX 399

City

WATSONVILLE

State

CA

Zip Code

95077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2011

**Transaction ID : INCA317**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**RON BURK****B.**

Mailing Address 2860 LORENCITA DRIVE

City

SANTA MARIA

State

CA

Zip Code

93455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOLD COAST PACKING, INC.

Occupation

FARMER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2011

**Transaction ID : INCA435**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**WILLIAM HUME****C.**

Mailing Address 600 MONTGOMERY STREET

City

SAN FRANCISCO

State

CA

Zip Code

94111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BASIC AMERICAN, INC.

Occupation

CHIEF EXECUTIVE OFFICER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2011

**Transaction ID : INCA439**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

WILLIAM HUME

A.

Mailing Address 600 MONTGOMERY STREET

City

SAN FRANCISCO

State

CA

Zip Code

94111

FEC ID number of contributing federal political committee.

C

Name of Employer

BASIC AMERICAN, INC.

Occupation

CHIEF EXECUTIVE OFFICER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2011

Transaction ID : INCA438

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

ANDREW PUZDER

B.

Mailing Address 6307 CARPINTERIA AVENUE, SUITE A

City

CARPINTERIA

State

CA

Zip Code

93013

FEC ID number of contributing federal political committee.

C

Name of Employer

CKE RESTAURANTS, INC.

Occupation

CHIEF EXECUTIVE OFFICER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2011

Transaction ID : INCA441

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

HARVEY L. HALL

C.

Mailing Address 1001 21ST STREET

City

BAKERSFIELD

State

CA

Zip Code

93301

FEC ID number of contributing federal political committee.

C

Name of Employer

HALL AMBULANCE

Occupation

PRESIDENT

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2011

Transaction ID : INCA338

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

4000.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

PRESTON B. HOTCHKIS

Mailing Address 125 E. VICTORIA STREET, SUITE L

City

SANTA BARBARA

State

CA

Zip Code

93101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2011

Transaction ID : INCA337

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

STAN IVERSEN

Mailing Address 109 EDELEN AVENUE

City

LOS GATOS

State

CA

Zip Code

95030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SUNCREST NURSERIES

Occupation

PRESIDENT

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2011

Transaction ID : INCA444

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

NICHOLAS ZWICK

Mailing Address 1933 CLIFF DRIVE, SUITE 26

City

SANTA BARBARA

State

CA

Zip Code

93109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2011

Transaction ID : INCA335

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

NICHOLAS ZWICK

A.

Mailing Address 1933 CLIFF DRIVE, SUITE 26

City

SANTA BARBARA

State

CA

Zip Code

93109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2012

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2011

Transaction ID : INCA336

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

PETER C. HARTMANN

B.

Mailing Address P.O. BOX 50414

City

MONTECITO

State

CA

Zip Code

93150

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED, SAME NAME

Occupation

DENTIST

Receipt For: 2012

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2011

Transaction ID : INCA358

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

DARRELL L. TWISSELMAN

C.

Mailing Address 7635 CATTLE DRIVE

City

SANTA MARGARITA

State

CA

Zip Code

93453

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED, SAME NAME

Occupation

RANCHER

Receipt For:

☐ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2011

Transaction ID : INCA345

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JUSTIN BALDWIN****A.**

Mailing Address 11680 CHIMNEY ROCK

City

PASO ROBLES

State

CA

Zip Code

93446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JUSTIN WINERY

Occupation

WINEMAKER

Receipt For:

☐ Primary  
☐ Other (specify)

General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2011

**Transaction ID : INCA352**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**DENNIS J. CASSIDY****B.**

Mailing Address 7485 OLD MONTEREY ROAD

City

PASO ROBLES

State

CA

Zip Code

93446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary  
☐ Other (specify)

General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2011

**Transaction ID : INCA355**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**CHRISTIAN A. FELIPE****C.**

Mailing Address 1929 JELINDA DRIVE

City

SANTA BARBARA

State

CA

Zip Code

93108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary  
☐ Other (specify)

General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2011

**Transaction ID : INCA353**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....

3750.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CHRISTIAN A. FELIPE****A.**

Mailing Address 1929 JELINDA DRIVE

City

SANTA BARBARA

State

CA

Zip Code

93108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2011

Transaction ID : INCA357

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**AGNES JOHNSON****B.**

Mailing Address 1097 FOXEN CANYON ROAD

City

SANTA MARIA

State

CA

Zip Code

93454

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JOHNSON FARMING

Occupation

FARMER

Receipt For: 2012

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2011

Transaction ID : INCA356

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JOSEPH LOZOWSKI****C.**

Mailing Address 9200 SORENSEN AVENUE

City

SANTA FE SPRINGS

State

CA

Zip Code

90670

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TANGRAM INTERIORS

Occupation

PRESIDENT

Receipt For: 2012

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2011

Transaction ID : INCA436

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....

5500.00

**TOTAL** This Period (last page this line number only).....



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JOSEPH LOZOWSKI****A.**

Mailing Address 9200 SORENSEN AVENUE

City

SANTA FE SPRINGS

State

CA

Zip Code

90670

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TANGRAM INTERIORS

Occupation

PRESIDENT

Receipt For: 2012

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2011

**Transaction ID : INCA437**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**ANDREW FIRESTONE****B.**

Mailing Address 160 VIA LEE

City

SANTA BARBARA

State

CA

Zip Code

93111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WEST COAST ASSET MANAGMENT

Occupation

ASSET MANAGMENT

Receipt For: 2012

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2011

**Transaction ID : INCA443**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**MICHAEL MARSTON****C.**

Mailing Address 3463 STATE STREET

City

SANTA BARBARA

State

CA

Zip Code

93105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2011

**Transaction ID : INCA361**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....

5500.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 18 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MICHAEL MARSTON**

Mailing Address 3463 STATE STREET

City

SANTA BARBARA

State

CA

Zip Code

93105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2011

Transaction ID : INCA362

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**ADAM MENDELSON**

Mailing Address 8380 DOVER DRIVE

City

GRANITE BAY

State

CA

Zip Code

95746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MERCURY PUBLIC AFFAIRS

Occupation

PARTNER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2011

Transaction ID : INCA442

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**PAULI RANCH**

Mailing Address 12507 HAWN CREEK ROAD

City

POTTER VALLEY

State

CA

Zip Code

95469

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2011

Transaction ID : INCA380

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4500.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : INCA380

NOT INCORPORATED.

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DANIEL R. LEWIS**

Mailing Address 1025 PACIFIC STREET

City

SAN LUIS OBISPO

State

CA

Zip Code

93401

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED, SAME NAME

Occupation

PHYSICIAN

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2011

Transaction ID : INCA388

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**RIVER PARK PROPERTIES II**

Mailing Address 265 E. RIVER PARK CIRCLE, SUITE 15

City

FRESNO

State

CA

Zip Code

93720

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2011

Transaction ID : INCA389

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**EDWARD M. KASHIAN**

Mailing Address 265 E. RIVER PARK CIRCLE, SUITE 15

City

FRESNO

State

CA

Zip Code

93720

FEC ID number of contributing federal political committee.

C

Name of Employer

LANCE-KASHIAN &amp; CO.

Occupation

CHIEF EXECUTIVE OFFICER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		25		2011

Transaction ID : IDTA8

Amount of Each Receipt this Period

2500.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

2750.00

TOTAL This Period (last page this line number only).....

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`H9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : INCA389

SEE PARTNERSHIP ATTRIBUTION BELOW.

Form/Schedule: SA11AI

Transaction ID: IDTA8

PARTNERSHIP ATTRIBUTION

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

RIVER PARK PROPERTIES II

A.

Mailing Address 265 E. RIVER PARK CIRCLE, SUITE 15

City

FRESNO

State

CA

Zip Code

93720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2011

Transaction ID : INCA521

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

EDWARD M. KASHIAN

B.

Mailing Address 265 E. RIVER PARK CIRCLE, SUITE 15

City

FRESNO

State

CA

Zip Code

93720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LANCE-KASHIAN &amp; CO.

Occupation

CHIEF EXECUTIVE OFFICER

Receipt For: 2012

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2011

Transaction ID : IDTA9

Amount of Each Receipt this Period

2500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

RON BURK

C.

Mailing Address 2860 LORENCITA DRIVE

City

SANTA MARIA

State

CA

Zip Code

93455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOLD COAST PACKING, INC.

Occupation

FARMER

Receipt For: 2012

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2011

Transaction ID : INCA446

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2600.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`H9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : INCA521

SEE PARTNERSHIP ATTRIBUTION BELOW.

Form/Schedule: SA11AI

Transaction ID: IDTA9

PARTNERSHIP ATTRIBUTION

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 24 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

MARGARET R. DUFLOCK

A.

Mailing Address P.O. BOX 82

City

SAN ARDO

State

CA

Zip Code

93450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SAN BERNARDO RANCHO

Occupation

MANAGING PARTNER

Receipt For: 2012

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2011

Transaction ID : INCA363

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

A. JERROLD PERENCHIO

B.

Mailing Address 1999 AVENUE OF THE STARS, SUITE 30

City

LOS ANGELES

State

CA

Zip Code

90067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHARTWELL PARTNERS, LLC

Occupation

CHIEF EXECUTIVE OFFICER

Receipt For: 2012

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2011

Transaction ID : INCA365

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

ERNEST I. ROIDE

C.

Mailing Address 88 BUENA VISTA AVENUE

City

SAN LUIS OBISPO

State

CA

Zip Code

93405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PROMOTION PLUS

Occupation

FOUNDER

Receipt For: 2012

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2011

Transaction ID : INCA366

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

KENNETH DEWAR

A.

Mailing Address 1151 CORBETT CANYON ROAD

City

ARROYO GRANDE

State

CA

Zip Code

93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JB DEWAR INC.

Occupation

PRESIDENT

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2011

Transaction ID : INCA398

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

PETER JORDANO

B.

Mailing Address 550 S. PATTERSON AVENUE

City

SANTA BARBARA

State

CA

Zip Code

93111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JORDANO'S INC.

Occupation

CHIEF EXECUTIVE OFFICER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2011

Transaction ID : INCA397

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

DONN TOGNAZZINI

C.

Mailing Address P.O. BOX 599

City

LOS OLIVOS

State

CA

Zip Code

93441

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2011

Transaction ID : INCA394

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

DONN TOGNAZZINI

A.

Mailing Address P.O. BOX 599

City

LOS OLIVOS

State

CA

Zip Code

93441

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		10		2011

Transaction ID : INCA393

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

EL SUR RANCH

B.

Mailing Address P.O. BOX 1588

City

MONTEREY

State

CA

Zip Code

93942

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		11		2011

Transaction ID : INCA507

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

CAROL M. ATER

C.

Mailing Address 138 COUNTRY OAK WAY

City

ARROYO GRANDE

State

CA

Zip Code

93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		12		2011

Transaction ID : INCA370

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : INCA507

NOT INCORPORATED.

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHARLES H. KAMM

A.

Mailing Address 734 PACIFIC STREET

City

SAN LUIS OBISPO

State

CA

Zip Code

93401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KAMM REALTY

Occupation

REAL ESTATE INVESTMENTS

Receipt For: 2012



Primary



General



Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		12		2011

Transaction ID : INCA368

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

JAMES STOLLBERG

B.

Mailing Address 2529-B PROFESSIONAL PARKWAY

City

SANTA MARIA

State

CA

Zip Code

93455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAVERICK FARMING

Occupation

OWNER

Receipt For: 2012



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		12		2011

Transaction ID : INCA464

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

ERNEST A. BRYANT, III

C.

Mailing Address 1690 SAN LEANDRO LANE

City

SANTA BARBARA

State

CA

Zip Code

93108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED, SAME NAME

Occupation

RANCHER

Receipt For: 2012



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		17		2011

Transaction ID : INCA401

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

1600.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 29 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BRUCE CONWAY****A.**

Mailing Address P.O. BOX 2050

City

ORCUTT

State

CA

Zip Code

93457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CAL-COAST ACIDIZING SERVICE, INC.

Occupation

PRESIDENT

Receipt For: 2012

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2011

**Transaction ID : INCA403**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**CAROLINE EISKAMP****B.**

Mailing Address 360 TREICHEL LANE

City

WATSONVILLE

State

CA

Zip Code

95076

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2011

**Transaction ID : INCA402**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**CHARLES F. MURRAY, JR.****C.**

Mailing Address 2349B HONOLULU AVENUE

City

MONTROSE

State

CA

Zip Code

91020

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CMI DIRECT

Occupation

BROKER

Receipt For: 2012

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2011

**Transaction ID : INCA400**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....

3750.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

MICHAEL W. MOATS

Mailing Address 525 E. PLAZA DRIVE, #200

City

SANTA MARIA

State

CA

Zip Code

93454

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED, SAME NAME

Occupation

PHYSICIAN

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2011

Transaction ID : INCA466

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

ANN CORKERY

Mailing Address 9502 NELSON LANE

City

MANASSAS

State

VA

Zip Code

20110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SN SERVICING CORP.

Occupation

DIRECTOR

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2011

Transaction ID : INCA447

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MUTHIALIAH BABU

Mailing Address 4635 CAMLIN COURT

City

SANTA MARIA

State

CA

Zip Code

93455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED, SAME NAME

Occupation

PHYSICIAN

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2011

Transaction ID : INCA406

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**GEOFF BLOOMINGDALE****A.**

Mailing Address 1375 FARREN ROAD

City

GOLETA

State

CA

Zip Code

93117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED, SAME NAME

Occupation

RANCHER

Receipt For: 2012

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2011

**Transaction ID : INCA404**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**BREAULT NODAK MINERALS LLC****B.**

Mailing Address 979 SWEET GUM LANE

City

NIPOMO

State

CA

Zip Code

93444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2011

**Transaction ID : INCA520**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**TONY BREAULT****C.**

Mailing Address 979 SWEET GUM LANE

City

NIPOMO

State

CA

Zip Code

93444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BREAULT NODAK MINERALS LLC

Occupation

MANAGING PARTNER

Receipt For: 2012

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2011

**Transaction ID : IDTA7**

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]****SUBTOTAL** of Receipts This Page (optional).....

1250.00

**TOTAL** This Period (last page this line number only).....

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : INCA520

SEE PARTNERSHIP ATTRIBUTION BELOW.

Form/Schedule: SA11AI

Transaction ID: IDTA7

PARTNERSHIP ATTRIBUTION



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

R. E. FULTON

A.

Mailing Address 1001 VEREDA DEL CIERVO

City

GOLETA

State

CA

Zip Code

93117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2011

Transaction ID : INCA405

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

KELLY JENSEN

B.

Mailing Address 4296 RANCHO ASOLEADO

City

SANTA BARBARA

State

CA

Zip Code

93110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAV INC.

Occupation

PRESIDENT

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2011

Transaction ID : INCA407

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

AMY ADAM

C.

Mailing Address 4786 APPALOUSA TRAIL

City

SANTA MARIA

State

CA

Zip Code

93455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ADAM FARMS

Occupation

FARMER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2011

Transaction ID : INCA419

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

ED COOK

A.

Mailing Address 990 PARK CENTER DRIVE, SUITE G

City

VISTA

State

CA

Zip Code

92081

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INTERNATIONAL POLY BAG &amp; PACKAGING

Occupation

OWNER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		24		2011

Transaction ID : INCA410

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

DAREN E. GEE

B.

Mailing Address 1786 OAK BROOK LANE

City

SANTA MARIA

State

CA

Zip Code

93455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DB SPECIALTY FARMS

Occupation

OWNER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		24		2011

Transaction ID : INCA409

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

LAUREL JOHNSON

C.

Mailing Address 316 MID VALLEY CENTER, #272

City

CARMEL

State

CA

Zip Code

93923

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		24		2011

Transaction ID : INCA496

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

M &amp; L LAND

A.

Mailing Address P.O. BOX 2426

City

SANTA MARIA

State

CA

Zip Code

93457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2011

Transaction ID : INCA536

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

LAWRENCE PEREIRA

B.

Mailing Address P.O. 2426

City

SANTA MARIA

State

CA

Zip Code

93457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

M &amp; L LAND

PARTNER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2011

Transaction ID : IDTA11

Amount of Each Receipt this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

MARK PEREIRA

C.

Mailing Address P.O. BOX 2426

City

SANTA MARIA

State

CA

Zip Code

93457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

M &amp; L LAND

PARTNER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2011

Transaction ID : IDTA10

Amount of Each Receipt this Period

1250.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : INCA536

SEE PARTNERSHIP ATTRIBUTION BELOW.

Form/Schedule: SA11AI

Transaction ID: IDTA11

PARTNERSHIP ATTRIBUTION

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : IDTA10

PARTNERSHIP ATTRIBUTION

Form/Schedule:  
Transaction ID:

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS****A.**

Full Name (Last, First, Middle Initial)

**JOSEPH A. OLIVERA, JR.**

Mailing Address 830 HASLAM DRIVE

City

SANTA MARIA

State

CA

Zip Code

93456

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2011

**Transaction ID : INCA414**

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

**HELOISE BACON POWER**

Mailing Address P.O. BOX 1160

City

SOLVANG

State

CA

Zip Code

93464

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2011

**Transaction ID : INCA416**

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

**ROBERT PULIDO, JR.**

Mailing Address 3142 RED DRIVE

City

SANTA MARIA

State

CA

Zip Code

93455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WINDSET FARMS

Occupation

DIRECTOR OF HUMAN RESOURCES

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2011

**Transaction ID : INCA413**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

DANIEL SHEPARD

A.

Mailing Address 434 S. PALISADE DRIVE

City

SANTA MARIA

State

CA

Zip Code

93454

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		24		2011

Transaction ID : INCA494

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

TVJ SONS LLC

B.

Mailing Address P.O. BOX 1217

City

SANTA MARIA

State

CA

Zip Code

93456

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		24		2011

Transaction ID : INCA495

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

MICHAEL BOUQUET

C.

Mailing Address P.O. BOX 1217

City

SANTA MARIA

State

CA

Zip Code

93456

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TVJ SONS, LLC

Occupation

MANAGING PARTNER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

333.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		24		2011

Transaction ID : IDTA6

Amount of Each Receipt this Period

333.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : INCA495

SEE PARTNERSHIP ATTRIBUTION BELOW.

Form/Schedule: SA11AI  
Transaction ID: IDTA6

PARTNERSHIP ATTRIBUTION



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

PATRICK CUSACK

A.

Mailing Address P.O. BOX 1217

City

SANTA MARIA

State

CA

Zip Code

93456

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TVJ SONS, LLC

Occupation

MANAGING PARTNER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

334.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		24		2011

Transaction ID : IDTA4

Amount of Each Receipt this Period

334.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

MICHAEL MCNULTY

B.

Mailing Address P.O. BOX 1217

City

SANTA MARIA

State

CA

Zip Code

93456

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TVJ SONS, LLC

Occupation

MANAGING PARTNER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

333.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		24		2011

Transaction ID : IDTA5

Amount of Each Receipt this Period

333.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

ROGER FREBERG

C.

Mailing Address 1384 SONRISA COURT

City

SAN LUIS OBISPO

State

CA

Zip Code

93405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		26		2011

Transaction ID : INCA499

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : IDTA4

PARTNERSHIP ATTRIBUTION

Form/Schedule: SA11AI  
Transaction ID: IDTA5

PARTNERSHIP ATTRIBUTION

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROBERT POOLE

A.

Mailing Address 1846 NATHAN WAY

City

NIPOMO

State

CA

Zip Code

93444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2011

Transaction ID : INCA498

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

ROBERT N. BECK

B.

Mailing Address P.O. BOX 627

City

PEBBLE BEACH

State

CA

Zip Code

93953

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BECK CONSULTING GROUP LLC

Occupation

OWNER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2011

Transaction ID : INCA460

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

SCOTT HAWKINS

C.

Mailing Address 1813 SPRINGFIELD ROAD

City

MOSS LANDING

State

CA

Zip Code

95039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HAWKINS ENGINEERING

Occupation

ENGINEER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2011

Transaction ID : INCA463

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 44 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

THOMAS LAHR

A.

Mailing Address 1936 LA PURISMA COURT

City

SAN MIGUEL

State

CA

Zip Code

93451

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PREFERRED AG SERVICES

Occupation

OWNER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		28		2011

Transaction ID : INCA504

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MADJEDI DESIGN MANAGEMENT

B.

Mailing Address 330 ACERO PLACE

City

ARROYO GRANDE

State

CA

Zip Code

93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		28		2011

Transaction ID : INCA506

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

KEVIN SLOAT

C.

Mailing Address 408 CROCKER ROAD

City

SACRAMENTO

State

CA

Zip Code

95864

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SLOAT HIGGINS JENSEN &amp; ASSOC.

Occupation

LOBBYIST

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		28		2011

Transaction ID : INCA462

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1800.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : INCA506

NOT INCORPORATED

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

TOSHIKO TOMOOKA

A.

Mailing Address 200 N. SUEY ROAD

City

SANTA MARIA

State

CA

Zip Code

93454

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TOMOOKA FARMSOccupation  
FARMER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		28		2011

Transaction ID : INCA501

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

ROBERTO ALCARAZ

B.

Mailing Address 1326 WEST STOWELL ROAD

City

SANTA MARIA

State

CA

Zip Code

93458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GPC PALLETS INC.Occupation  
OWNER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2011

Transaction ID : INCA453

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

CHERYL BEDFORD

C.

Mailing Address 1300 NORTH H STREET

City

LOMPOC

State

CA

Zip Code

93436

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SUNSET AUTO CENTEROccupation  
PRESIDENT

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2011

Transaction ID : INCA458

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

1100.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

ELLA BRITTINGHAM

A.

Mailing Address 1482 EAST VALLEY ROAD

City

SANTA BARBARA

State

CA

Zip Code

93108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

NOT EMPLOYED

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2011

Transaction ID : INCA449

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

ELLA BRITTINGHAM

B.

Mailing Address 1482 EAST VALLEY ROAD

City

SANTA BARBARA

State

CA

Zip Code

93108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

NOT EMPLOYED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2011

Transaction ID : INCA448

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

SCOTT BRITTINGHAM

C.

Mailing Address 1482 EAST VALLEY ROAD

City

SANTA BARBARA

State

CA

Zip Code

93108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED, SAME NAME

Occupation

PRIVATE INVESTOR

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2011

Transaction ID : INCA450

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

SCOTT BRITTINGHAM

A.

Mailing Address 1482 EAST VALLEY ROAD

City

SANTA BARBARA

State

CA

Zip Code

93108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED, SAME NAME

Occupation

PRIVATE INVESTOR

Receipt For: 2012

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2011

Transaction ID : INCA451

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

ALEJANDRA CHAVEZ

B.

Mailing Address 1150 GRACE LANE

City

NIPOMO

State

CA

Zip Code

93444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHAVEZ PROPERTY MANAGEMENT

Occupation

MEMBER

Receipt For: 2012

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2011

Transaction ID : INCA454

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

EUGENE MARTINEZ

C.

Mailing Address 4318 MANCHESTER COURT

City

SANTA MARIA

State

CA

Zip Code

93455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2011

Transaction ID : INCA457

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

3250.00

TOTAL This Period (last page this line number only).....



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

CRAIG STEPHENS

A.

Mailing Address P.O. BOX 6007

City

SANTA MARIA

State

CA

Zip Code

93456

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SM TIRE

Occupation

PRESIDENT

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2011

Transaction ID : INCA456

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

JEFF TOWNSEND

B.

Mailing Address 428 INDIO DRIVE

City

SHELL BEACH

State

CA

Zip Code

93449

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2011

Transaction ID : INCA452

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

RON BURK

C.

Mailing Address 2860 LORENCITA DRIVE

City

SANTA MARIA

State

CA

Zip Code

93455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOLD COAST PACKING, INC.

Occupation

FARMER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : INCA484

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2800.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LORENA CHAVEZ****A.**

Mailing Address 1141 TAMA LANE

City

SANTA MARIA

State

CA

Zip Code

93455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

**Transaction ID : INCA508**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**GEORAGEANN EISKAMP****B.**

Mailing Address 30 W. RIANDA ROAD

City

WATSONVILLE

State

CA

Zip Code

95076

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COWLES BERRY FARM

Occupation

FARMER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

**Transaction ID : INCA476**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**MARY ELLEN FOX****C.**

Mailing Address 14751 QUITO ROAD

City

SARATOGA

State

CA

Zip Code

95070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

M.E. FOX &amp; COMPANY

Occupation

VICE CHAIR

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

**Transaction ID : INCA534**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 51 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

MARY ELLEN FOX

A.

Mailing Address 14751 QUITO ROAD

City

SARATOGA

State

CA

Zip Code

95070

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
M.E. FOX & COMPANYOccupation  
VICE CHAIR

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : INCA535

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

JOHN C. HARRIS

B.

Mailing Address 23300 W. OAKLAND AVENUE

City

COALINGA

State

CA

Zip Code

93210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HARRIS FARMS, INC.Occupation  
CHAIRMAN

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : INCA482

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JOHN C. HARRIS

C.

Mailing Address 23300 W. OAKLAND AVENUE

City

COALINGA

State

CA

Zip Code

93210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HARRIS FARMS, INC.Occupation  
CHAIRMAN

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : INCA480

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 52 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOHN C. HARRIS

Mailing Address 23300 W. OAKLAND AVENUE

City

COALINGA

State

CA

Zip Code

93210

FEC ID number of contributing federal political committee.

C

Name of Employer

HARRIS FARMS, INC.

Occupation

CHAIRMAN

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : INCA481

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

WILLIAM HUME

Mailing Address 600 MONTGOMERY STREET

City

SAN FRANCISCO

State

CA

Zip Code

94111

FEC ID number of contributing federal political committee.

C

Name of Employer

BASIC AMERICAN, INC.

Occupation

CHIEF EXECUTIVE OFFICER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : INCA525

Amount of Each Receipt this Period

-2500.00

Full Name (Last, First, Middle Initial)

WILLIAM HUME

Mailing Address 600 MONTGOMERY STREET

City

SAN FRANCISCO

State

CA

Zip Code

94111

FEC ID number of contributing federal political committee.

C

Name of Employer

BASIC AMERICAN, INC.

Occupation

CHIEF EXECUTIVE OFFICER

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : INCA469

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : INCA525

REFUND OF CREDIT CARD CONTRIBUTION.

Form/Schedule: SA11AI

Transaction ID: INCA469

CONTRIBUTION REFUNDED.

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

PETER KEITH

A.

Mailing Address 865 CHARLES STREET

City

GROVER BEACH

State

CA

Zip Code

93433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED, SAME NAME

Occupation

PROPERTY INVESTOR

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : INCA472

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

VICTOR LANDEY

B.

Mailing Address 4379 FOXBURROW COURT

City

SANTA MARIA

State

CA

Zip Code

93455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : INCA510

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

SPENCER E. NEUMANN

C.

Mailing Address 1002 PAULINE AVENUE

City

BELLAIRE

State

TX

Zip Code

77401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : INCA509

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 55 OF 79

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ABEL MALDONADO FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOHN ROMANS

A.

Mailing Address 46069 ARROYO SECO ROAD

City

GREENFIELD

State

CA

Zip Code

93927

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GROWERS EXPRESSOccupation  
GROWER/SHIPPER

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : INCA475

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

ROBERT F. STOVICEK

B.

Mailing Address 2845 MONTE VERDE

City

SANTA MARIA

State

CA

Zip Code

93455

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PRIMUS GROUP, INC.Occupation  
CHEMIST

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : INCA512

Amount of Each Receipt this Period

-750.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

108900.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : INCA512

REVERSAL OF CREDIT CARD CONTRIBUTION THAT WAS NOT PROCESSED.

Form/Schedule:

Transaction ID:



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 57 OF 79

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JOE CENTENO FOR SUPERVISOR (FPPC ID#1238073)**

Mailing Address 403 ST. ANDREWS WAY

City

SANTA MARIA

State

CA

Zip Code

93455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 10 2011

Transaction ID : INCA395

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**CKE RESTAURANTS, INC. PAC (FPPC ID# 1322028)**

Mailing Address 6307 CARPINTERIA AVENUE, SUITE A

City

CARPINTERIA

State

CA

Zip Code

93013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 24 2011

Transaction ID : INCA408

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.**  
Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

1500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 58 OF 79

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ABEL MALDONADO (PERSONAL FUNDS)****A.**

Mailing Address 4051 SANTA MARIA MESA ROAD

City

SANTA MARIA

State

CA

Zip Code

93454

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

FORMER LT. GOVERNOR OF CALIFORNIA

Receipt For: 2012



Primary



General



Other (specify)

Election Cycle-to-Date

500100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

**Transaction ID : PAYA385**

Amount of Each Receipt this Period

250000.00

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

250000.00

**TOTAL** This Period (last page this line number only).....

250000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 79

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LOMPOC VALLEY FESTIVAL ASSOCIATION**

Mailing Address 414 W. OCEAN AVENUE

City	State	Zip Code
LOMPOC	CA	93436

Purpose of Disbursement  
PARADE ENTRY FEE

007

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2011

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : EXPB176

**B. THE MONACO GROUP**

Mailing Address 14352 FRANKLIN AVENUE, #B

City	State	Zip Code
TUSTIN	CA	92780

Purpose of Disbursement  
FUNDRAISING EVENT INVITATION

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2011

Amount of Each Disbursement this Period

9769.84
---------

Transaction ID : EXPB178

**C. FUNDRAISING BY NET, LLC**

Mailing Address 1101 PENNSYLVANIA AVE. NW, 6TH FL.

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		06		2011

Amount of Each Disbursement this Period

697.92
--------

Transaction ID : EXPB249

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

10667.76

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 79

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CHANNEL CAT CHARTERS**

Mailing Address 1309 CRESTLINE DRIVE

City	State	Zip Code
SANTA BARBARA	CA	93105

Purpose of Disbursement  
FUNDRAISING/VENUE EXPENSE

003

Category/  
Type

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
07 / 07 / 2011

Amount of Each Disbursement this Period

4400.00
---------

Transaction ID : EXPB208

**B. ELECTIONMALL TECHNOLOGIES, INC.**

Mailing Address 1101 PENNSYLVANIA AVENUE, NW

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement  
WEBSITE EXPENSE

001

Category/  
Type

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
07 / 07 / 2011

Amount of Each Disbursement this Period

495.00
--------

Transaction ID : EXPB189

**C. ELECTIONMALL TECHNOLOGIES, INC.**

Mailing Address 1101 PENNSYLVANIA AVENUE, NW

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement  
WEBSITE EXPENSE

001

Category/  
Type

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
07 / 07 / 2011

Amount of Each Disbursement this Period

25.00
-------

Transaction ID : EXPB185

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4920.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ELECTIONMALL TECHNOLOGIES, INC.**

Mailing Address 1101 PENNSYLVANIA AVENUE, NW

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement  
WEBSITE EXPENSE

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2011

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : EXPB187

**B. SUNSTAR MEDIA**

Mailing Address 834 ABREGO STREET, SUITE B

City	State	Zip Code
MONTEREY	CA	93940

Purpose of Disbursement  
WEBSITE EXPENSE

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2011

Amount of Each Disbursement this Period

235.00
--------

Transaction ID : EXPB191

**C. AMERICAN EXPRESS**

Mailing Address P.O. BOX 0001

City	State	Zip Code
LOS ANGELES	CA	90096

Purpose of Disbursement  
CREDIT CARD

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2011

Amount of Each Disbursement this Period

20.00
-------

Transaction ID : EXPB429

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

330.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address P.O. BOX 0001

City	State	Zip Code
LOS ANGELES	CA	90096

Purpose of Disbursement  
CREDIT CARD

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2011

Amount of Each Disbursement this Period

3272.55
---------

Transaction ID : EXPB427

**B. CENTRAL COAST AVIATION**

Mailing Address 50 MORTENSEN AVENUE

City	State	Zip Code
SALINAS	CA	93905

Purpose of Disbursement  
AMERICAN EXPRESS - AIR TRAVEL ON 5/17/11 (PAID SAME DATE)

002

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2011

Amount of Each Disbursement this Period

274.59
--------

Transaction ID : PDTB5EXPB427

[MEMO ITEM]

**C. TASTE**

Mailing Address 9402 MAIN STREET

City	State	Zip Code
PLYMOUTH	CA	95669

Purpose of Disbursement  
AMERICAN EXPRESS - CAMPAIGN MEETING/DINNER EXPENSE (PAID  
5/20/11)

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2011

Amount of Each Disbursement this Period

335.20
--------

Transaction ID : PDTB6EXPB427

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3272.55

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 79

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. THE FRENCH POODLE**

Mailing Address P.O. BOX 4692

City	State	Zip Code
CARMEL	CA	93921

Purpose of Disbursement  
AMERICAN EXPRESS - FUNDRAISING/CATERING EXPENSE (PAID 6/3/11)

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2011

Amount of Each Disbursement this Period

1875.00
---------

Transaction ID : PDTB7EXPB427

**[MEMO ITEM]****B. FOXEN VINEYARD**

Mailing Address 7200 FOXEN CANYON ROAD

City	State	Zip Code
SANTA MARIA	CA	93454

Purpose of Disbursement  
AMERICAN EXPRESS - FUNDRAISING/CATERING EXPENSE (PAID  
6/9/11)

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2011

Amount of Each Disbursement this Period

297.28
--------

Transaction ID : PDTB9EXPB427

**[MEMO ITEM]****C. KENNETH VOLK VINEYARDS**

Mailing Address 5230 TEPUSQUET ROAD

City	State	Zip Code
SANTA MARIA	CA	93454

Purpose of Disbursement  
AMERICAN EXPRESS - FUNDRAISING/CATERING EXPENSE (PAID  
6/9/11)

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2011

Amount of Each Disbursement this Period

438.48
--------

Transaction ID : PDTB8EXPB427

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
------

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 64 OF 79

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FUNDRAISING BY NET, LLC**

Mailing Address 1101 PENNSYLVANIA AVE. NW, 6TH FL.

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		18		2011

Amount of Each Disbursement this Period

671.80
--------

Transaction ID : EXPB514

**B. FUNDRAISING BY NET, LLC**

Mailing Address 1101 PENNSYLVANIA AVE. NW, 6TH FL.

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		19		2011

Amount of Each Disbursement this Period

663.39
--------

Transaction ID : EXPB485

**C. FUNDRAISING BY NET, LLC**

Mailing Address 1101 PENNSYLVANIA AVE. NW, 6TH FL.

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		03		2011

Amount of Each Disbursement this Period

4.07
------

Transaction ID : EXPB486

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1339.26



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 65 OF 79

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NEW WEST SPECIAL OCCASION CATERING**

Mailing Address 181 INDUSTRIAL WAY

City	State	Zip Code
BUELLTON	CA	93427

Purpose of Disbursement  
CATERING COST

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		09		2011

Amount of Each Disbursement this Period

5491.88

Transaction ID : EXPB327

**B. RUSACK VINEYARDS**

Mailing Address 1819 BALLARD CANYON ROAD

City	State	Zip Code
SOLVANG	CA	93463

Purpose of Disbursement  
CATERING COST

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		09		2011

Amount of Each Disbursement this Period

993.02

Transaction ID : EXPB329

**C. SUTTON LAW FIRM**

Mailing Address 150 POST STREET, SUITE 405

City	State	Zip Code
SAN FRANCISCO	CA	94108

Purpose of Disbursement  
LEGAL & ACCOUNTING SERVICES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		09		2011

Amount of Each Disbursement this Period

9998.08

Transaction ID : EXPB331

**SUBTOTAL** of Disbursements This Page (optional).....

16482.98

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 66 OF 79

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address P.O. BOX 0001

City	State	Zip Code
LOS ANGELES	CA	90096

Purpose of Disbursement  
CREDIT CARD

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 12 / 2011

Amount of Each Disbursement this Period

456.24
--------

Transaction ID : EXPB431

**B. AT&T MOBILITY**

Mailing Address P.O. BOX 6463

City	State	Zip Code
CAROL STREAM	IL	60197

Purpose of Disbursement  
AMERICAN EXPRESS - PHONE (PAID 8/12/11)

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 12 / 2011

Amount of Each Disbursement this Period

436.24
--------

Transaction ID : PDTB10EXPB431

[MEMO ITEM]

**C. FUNDRAISING BY NET, LLC**

Mailing Address 1101 PENNSYLVANIA AVE. NW, 6TH FL.

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 15 / 2011

Amount of Each Disbursement this Period

60.56
-------

Transaction ID : EXPB487

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

516.80

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 79

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FUNDRAISING BY NET, LLC**

Mailing Address 1101 PENNSYLVANIA AVE. NW, 6TH FL.

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		23		2011

Amount of Each Disbursement this Period

1009.90
---------

Transaction ID : EXPB488

**B. FUNDRAISING BY NET, LLC**

Mailing Address 1101 PENNSYLVANIA AVE. NW, 6TH FL.

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		30		2011

Amount of Each Disbursement this Period

147.49
--------

Transaction ID : EXPB489

**C. ELECTIONMALL TECHNOLOGIES, INC.**

Mailing Address 1101 PENNSYLVANIA AVENUE, NW

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement  
WEBSITE EXPENSE

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		01		2011

Amount of Each Disbursement this Period

50.00
-------

Transaction ID : EXPB513

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1207.39

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 68 OF 79

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FUNDRAISING BY NET, LLC**

Mailing Address 1101 PENNSYLVANIA AVE. NW, 6TH FL.

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		07		2011

Amount of Each Disbursement this Period

17.24
-------

Transaction ID : EXPB490

**B. FUNDRAISING BY NET, LLC**

Mailing Address 1101 PENNSYLVANIA AVE. NW, 6TH FL.

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		20		2011

Amount of Each Disbursement this Period

74.18
-------

Transaction ID : EXPB491

**C. SANDY AGALOS**

Mailing Address 626 EVANS ROAD

City	State	Zip Code
SAN LUIS OBISPO	CA	93401

Purpose of Disbursement  
ADMINISTRATIVE SERVICES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		21		2011

Amount of Each Disbursement this Period

540.00
--------

Transaction ID : EXPB378

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

631.42

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 79

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SANDY AGALOS**

Mailing Address 626 EVANS ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		21		2011

City	State	Zip Code
SAN LUIS OBISPO	CA	93401

Amount of Each Disbursement this Period

42.42
-------

Purpose of Disbursement  
POSTAGE & SHIPPING

001

Transaction ID : EXPB523

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. COMPLETECAMPAIGNS.COM**

Mailing Address 205 PENNSYLVANIA AVENUE, SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		21		2011

City	State	Zip Code
WASHINGTON	DC	20003

Amount of Each Disbursement this Period

204.05
--------

Purpose of Disbursement  
WEB EXPENSE

001

Transaction ID : EXPB376

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. NYGREN & COMPANY INC.**

Mailing Address 3470 PARK DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		21		2011

City	State	Zip Code
EL DORADO HILLS	CA	95762

Amount of Each Disbursement this Period

2000.00
---------

Purpose of Disbursement  
CONSULTANT-STRATEGY

001

Transaction ID : EXPB374

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....

2246.47

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 71 OF 79

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input checked="" type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ABEL MALDONADO (PERSONAL FUNDS)**

Mailing Address 4051 SANTA MARIA MESA ROAD

City	State	Zip Code
SANTA MARIA	CA	93454

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2011

Amount of Each Disbursement this Period

250000.00
-----------

Transaction ID : PAYB150

**B.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

--

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

250000.00

250000.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SB19A

Transaction ID : PAYB150

PURPOSE: LOAN PRINCIPAL PAYMENT

Form/Schedule:

Transaction ID:



**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 73 OF 79

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☐ 13a  
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC385

ABEL MALDONADO FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

ABEL MALDONADO (PERSONAL FUNDS)

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

4051 SANTA MARIA MESA ROAD

City

State

ZIP Code

SANTA MARIA

CA

93454

Original Amount of Loan

250000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

250000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 30 / 2011

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

250000.00

**TOTALS** This Period (last page in this line only)..... ►

250000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 74 OF 79

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**AMERICAN EXPRESS**Nature of Debt (Purpose):  
CREDIT CARD

Mailing Address P.O. BOX 0001

City State

LOS ANGELES

Zip Code

CA

90096

Outstanding Balance Beginning This Period

3272.55

Transaction ID : PAYD260

Amount Incurred This Period

0.00

Payment This Period

3272.55

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**AMERICAN EXPRESS**Nature of Debt (Purpose):  
CREDIT CARD

Mailing Address P.O. BOX 0001

City State

LOS ANGELES

Zip Code

CA

90096

Outstanding Balance Beginning This Period

20.00

Transaction ID : PAYD299

Amount Incurred This Period

0.00

Payment This Period

20.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CHANNEL CAT CHARTERS**Nature of Debt (Purpose):  
FUNDRAISING/VENUE EXPENSE

Mailing Address 1309 CRESTLINE DRIVE

City

SANTA BARBARA

State

CA

Zip Code

93105

Outstanding Balance Beginning This Period

4400.00

Transaction ID : PAYD207

Amount Incurred This Period

0.00

Payment This Period

4400.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

250000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

250000.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**ELECTIONMALL TECHNOLOGIES, INC.**

Nature of Debt (Purpose):  
**WEBSITE EXPENSE**

Mailing Address 1101 PENNSYLVANIA AVENUE, NW

City State Zip Code  
WASHINGTON DC 20004

Outstanding Balance Beginning This Period

495.00

Transaction ID : PAYD181

Amount Incurred This Period

0.00

Payment This Period

495.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**ELECTIONMALL TECHNOLOGIES, INC.**

Nature of Debt (Purpose):  
**WEBSITE EXPENSE**

Mailing Address 1101 PENNSYLVANIA AVENUE, NW

City State Zip Code  
WASHINGTON DC 20004

Outstanding Balance Beginning This Period

75.00

Transaction ID : PAYD182

Amount Incurred This Period

0.00

Payment This Period

75.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**LOMPOC VALLEY FESTIVAL ASSOCIATION**

Nature of Debt (Purpose):  
**PARADE ENTRY FEE**

Mailing Address 414 W. OCEAN AVENUE

City State Zip Code  
LOMPOC CA 93436

Outstanding Balance Beginning This Period

200.00

Transaction ID : PAYD175

Amount Incurred This Period

0.00

Payment This Period

200.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

250000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

250000.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**NEW WEST SPECIAL OCCASION CATERING**Nature of Debt (Purpose):  
CATERING COST

Mailing Address 181 INDUSTRIAL WAY

City State

Zip Code

BUELLTON

CA

93427

Outstanding Balance Beginning This Period

5491.88

Transaction ID : PAYD326

Amount Incurred This Period

0.00

Payment This Period

5491.88

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**SUNSTAR MEDIA**Nature of Debt (Purpose):  
WEBSITE EXPENSE

Mailing Address 834 ABREGO STREET, SUITE B

City State

Zip Code

MONTEREY

CA

93940

Outstanding Balance Beginning This Period

235.00

Transaction ID : PAYD184

Amount Incurred This Period

0.00

Payment This Period

235.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**SUNSTAR MEDIA**Nature of Debt (Purpose):  
WEBSITE EXPENSE

Mailing Address 834 ABREGO STREET, SUITE B

City

State

Zip Code

MONTEREY

CA

93940

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD517

Amount Incurred This Period

55.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

55.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

55.00

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

250000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

250000.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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☒ 10

NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**SUNSTAR MEDIA**

Nature of Debt (Purpose):

WEBSITE EXPENSE

Mailing Address 834 ABREGO STREET, SUITE B

City State

Zip Code

MONTEREY

CA

93940

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD518

Amount Incurred This Period

148.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

148.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**SUNSTAR MEDIA**

Nature of Debt (Purpose):

WEBSITE EXPENSE

Mailing Address 834 ABREGO STREET, SUITE B

City State

Zip Code

MONTEREY

CA

93940

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD519

Amount Incurred This Period

117.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

117.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**SUTTON LAW FIRM**

Nature of Debt (Purpose):

LEGAL &amp; ACCOUNTING SERVICES

Mailing Address 150 POST STREET, SUITE 405

City State

Zip Code

SAN FRANCISCO

CA

94108

Outstanding Balance Beginning This Period

9998.08

Transaction ID : PAYD293

Amount Incurred This Period

0.00

Payment This Period

9998.08

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

266.25

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

250000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

250000.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**SUTTON LAW FIRM**

Nature of Debt (Purpose):

LEGAL &amp; ACCOUNTING SERVICES

Mailing Address 150 POST STREET, SUITE 405

City State

SAN FRANCISCO

Zip Code

CA

94108

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD526

Amount Incurred This Period

8056.26

Payment This Period

0.00

Outstanding Balance at Close of This Period

8056.26

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**SUTTON LAW FIRM**

Nature of Debt (Purpose):

LEGAL &amp; ACCOUNTING SERVICES

Mailing Address 150 POST STREET, SUITE 405

City State

SAN FRANCISCO

Zip Code

CA

94108

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD527

Amount Incurred This Period

2051.22

Payment This Period

0.00

Outstanding Balance at Close of This Period

2051.22

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**SUTTON LAW FIRM**

Nature of Debt (Purpose):

LEGAL &amp; ACCOUNTING SERVICES

Mailing Address 150 POST STREET, SUITE 405

City State

SAN FRANCISCO

State

CA

Zip Code

94108

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD528

Amount Incurred This Period

2358.78

Payment This Period

0.00

Outstanding Balance at Close of This Period

2358.78

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

12466.26

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

250000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

250000.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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NAME OF COMMITTEE (In Full)

**ABEL MALDONADO FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THE MONACO GROUP**

Nature of Debt (Purpose):

**FUNDRAISING EVENT INVITATION**

Mailing Address 14352 FRANKLIN AVENUE, #B

City State

Zip Code

TUSTIN

CA

92780

Outstanding Balance Beginning This Period

9769.84

**Transaction ID : PAYD1**

Amount Incurred This Period

0.00

Payment This Period

9769.84

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

2) **TOTALS** This Period (last page this line number only) ..... ▶

12787.51

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

250000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

262787.51